## SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PD Box 58
Washburn, WI 54891
(715) 373-6138

## APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

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Amount Paid: jit #: 5-31-17 N-0178

Refund:

Date Stamp (Received) 5

		Compost soller			Foundation	Property 📗 🗀 I	– Pro		
_i_	ורם בסוונומביו	Poinable (w/serv	None		No Basement	Run a Business on	□ Rur		
	intract)	Double (m/conic	- 1		Basement	Relocate (existing bldg)	□ Re		
	Vaulted (min 200 gallon)	Privy (Pit) or			1.000 v	-	٦		
	Specify Type: May 1	😿 Sanitary (Exists) Spec	X S	1	Story	1		\$ 7.000	
Zvei	Specify Type:	☐ (New) Sanitary Spec	□ 2	<b>水</b> Year Round	1-Story + Loft	š u	Add		
- City		Municipal/City	<u> </u>	Seasonal	1-Story	New Construction	7 Ne		
		100						material	
	operty?	Is on the property?	bedrooms	USC	and/or basement			* include	
Water	pe of rv System	What Type of Sewer/Sanitary System	2, #	ï	# of Stories	Project #		Value at Time of Completion	
				0.0 (1.0 (1.0 (1.0 (1.0 (1.0 (1.0 (1.0 (				Non-Shoreland	
				1	11 %				
O S	□ No	Distance Structure is from Shoreline : feet	Distance Struc	Pond or Flowage	feet of Lake, Pond	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	₩ □ IS P	☐ Shoreland —	
Are Wetlands Present?	in one?	Distance Structure is from Shoreline:	Distance Struc	Stream (ind. Intermittent)	et of River, Stream	Is Property/Land within 300 feet of River, Stream (ind. Intermittent)  Creek or Landward side of Floodplain? If yescontinue	☐ is P		
							1		
	Acreage	Lot Size	Noshburn	Town of:	W 2	Township 49 N, Range	,	Section 35	
		DIOUN(3) NO.	Lou(s) No.	Vol & Page	Lot(s) CSM	1/4 Gov't Lot	New	1/4,	
		Black(e) No Subdivision:	( internal					LUCATION	
Ownership)	rded Document: (i.e. Eupperty	Recorded I	3120	digits)	nent) 04- (23 digits)	Legal Description: (Use Tax Statement)	ega a	PROJECT	
ő	Attached    Yes   No		c			Authorized Agent: (Person Signing Application on behalf of Ownerly)	(Person Signi	Authorized Agent: (	
orization	Written Authorization	Agent Mailing Address (include City/State/Zip):	ent Mailing Add		Agent Phone:				
ne:	Plumber Phone:		Plumber:		Contract	1100		Contractor:	
1.050	754-458-217	16845	TO	Jacob Colo	City Jack Light	Han	) )	Address of Property	
	Cell Phone:			1	Cau/Cra	MONDOON	MON	2617	-T
	1845	ままで	する	0 2220	0	) )	5	Owner's Marine:	
	Tele		City/Si	V	☐ SAWIJAKT ☐ FN	D—₩     LAND USE	REQUESTE	TYPE OF PERMIT REQUESTED-	<b>K</b> inata
ER	□ B.O.A. □ OTHER	SPECIAL USE		מסוועע	CANTAN		00%	O NOI SIAM CONSIN	7 e-
			Bayfield Co. Zoning Dept.		SUED TO APPLICAN	MSTRUCTIONS: No permits will be issued until all research pair.  Checks are made payable to: Bayfield County Zoning Department.  Checks are made payable to: Bayfield County Zoning Department.	mits Will be le to: Bayfie	NSTRUCTIONS: No peri hecks are made payabl	, O==
		Ne unio.				high oue soos file liters being	7	:	

L		None		
		length: 52, 7 Width: 26,	Height:	7
Existing Structure: (ii pe	IIII bell	<b>4</b>	Height:	
Proposed Use	3	Proposed Structure	Dimensions	Square Footage
		Principal Structure (first structure on property)	( x )	
		Residence (i.e. cabin, hunting shack, etc.)	( ×	
		with Loft	×	
Residential Use		with a Porch	×	
		with (2 <sup>nd</sup> ) Porch	(	224
-		with a Deck		7
		with (2 <sup>nd</sup> ) Deck & > C	~ ~ ~ ~ ~	to day to
☐ Commercial Use		with Attached Garage	* * *	
		Bunkhouse w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)		
	7	Mobile Home (manufactured date)	- 26 × 36 -	400
		Addition/Alteration (specify)	× ×	
☐ Municipal Use		Accessory Building (specify)	× >	
•		Accessory Building Addition/Alteration (specify)	. ^ )	
-			~ \ \	
		Special Use: (explain)	x >	
		Conditional Use: (explain)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
		Other: (explain)	^ ^	

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Run a Business on Property

No Basement Foundation

None

TO OBTAIN A PERMIT <u>or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES</u>
anying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) corrected and complete. I (we) are found in the second like and the second N S 7

Authorized Agent:

Address to send permit

Owner(s): (If there are Multiple Ow

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

vers lighted on the Deed 🔠 Own dars must sign or letter(s) of authorization must accompany this

Date

application)

Date

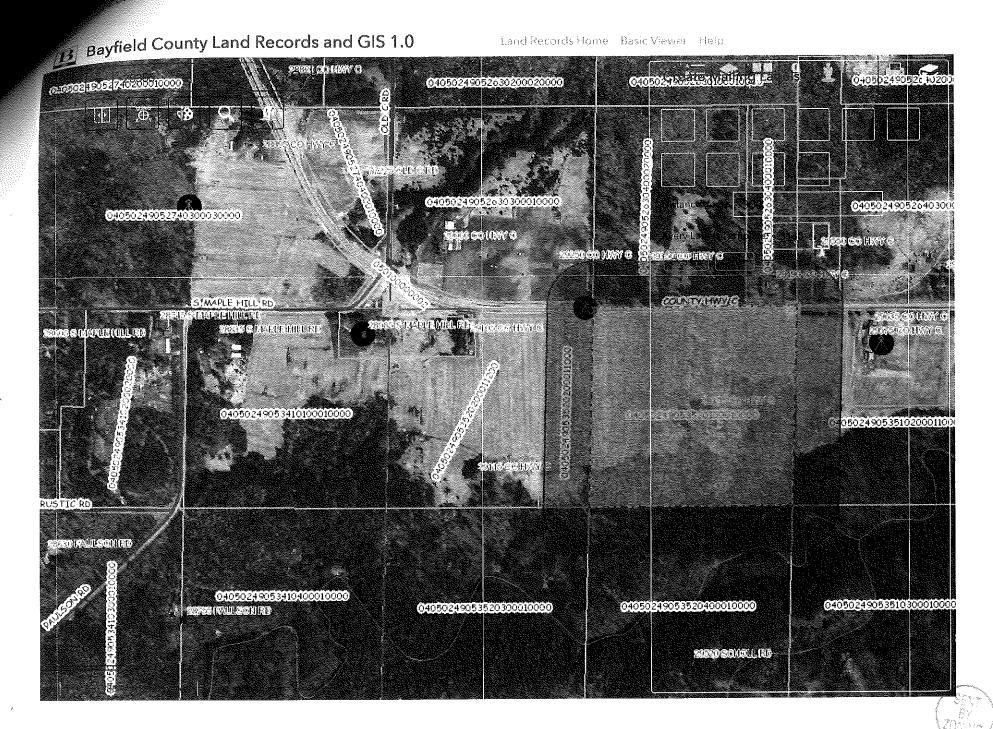
If you recently purchased the

Attach
Copy of Tax Statement
property send your Record

n the box below:

<u>Draw</u> or <u>Sketch</u> your Property (regardless of what you are applying for)

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City, Village, State or Federal its May Also Be Required

AND USE - X
SANITARY - 282679 (Private Intercept)
SIGN SPECIAL CONDITIONAL - ZC 5/18/2017
BOA -

## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Issued To: Gary & Darlene Thompson 17-0175 No. Town of Washburn Range **5** W. 49 35 Township Location: NE NW 1/4 Section  $\frac{1}{4}$  of CSM# Subdivision Block Gov't Lot Lot

For: Residential Use: [ 1- Story; Mobile Home (26' x 56') = 1,456 sq. ft.; Deck #1 (14' x 16') = 224 sq. ft.; Deck #2 (8' x 40') = 320 sq. ft. ] Total Overall = 2,000 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Per approval of the Zoning Committee and any condition approved at May 18, 2017 meeting.

Committee Condition: That neither home may be rented out.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Jennifer Murphy

Authorized Issuing Official

May 31, 2017

Date